PS Form 3811, February 2004 Domestic Return Receipt 10		
Article Number (Transfer from service label)		440 0000 0024 8868
07c v/063		☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
Warden Leon Forniss Staton Correctional Facility P.O. Box 56 Elmore, AL 36025-0056		3. Service Tupe
1. Article Addressed to:		D. Is delivery address different from item 1?
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A Signature X Conclus Indicated Agent B Received by (Printed Name) C. Date of Delivery Angela Thornel 12/207
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY